2017 Performance Improvement Report

STRATEGIC PRIORITY

1. Develop world-leading healthcare and research

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| **Project Name** | | | |
| Decrease Central Line Associated Blood Stream Infection (CLABSI) in Adult Oncology Unit | | | |
| **Site** | | **Department** | |
| Jeddah | | Adult Oncology | |
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| **Project Status** | **Project Start Date** | | **Project End Date** |
| Completed | 05-01-2016 | | 12-31-2016 |

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| **Problem:** Why the project was needed?  Central line-blood stream infection rate increased in the first 4 months of 2016 to 2.1 in hematology /oncology service while the NHSN (National Healthcare Safety Network) rate is 1.3 | **Aims:** What will the project achieve?  Control the central line related to blood stream infection and to decrease the rate in the Hem/Oncology Service to reach the national benchmark = 1.3 |
| **Benefits/Impact:** What is the improvement outcome?  *(check all that apply)*  Contained or reduced costs  Improved productivity  Improved work process  Improved cycle time  Increased customer satisfaction  Other (please explain)  Click or tap here to enter text. | **Quality Domain:** Which of the domains of healthcare quality does this project support?  *(Select only one)*  **Patient Centred** |

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| |  |  | | --- | --- | | **Measures:** Performance metrics to be evaluated | **Targets:** Expected outcomes | | Central line-blood stream infection rate | Reach the national benchmark = 1.3 | |
| **Interventions:** Overview of key steps/work completed   * Weekly audit (hand washing, CVC (Central Venous Catheter), environmental, partner audit. * Change in practice in cooperation with NPQR (Nursing Practice, Quality And Research Department ) department to use 3 way device on our patients CVCs and cover the rubber port of IV line to make sure not been used by the nurses. * Re-certifying all staff for CVC management. * Monitoring nurses practice intensively. * Staff education quarterly. * Patient & family education daily. * Hand washing campaign quarterly |
| **Results:** Insert relevant graphs and charts to illustrate improvement pre and post project  *(insert relevant graphs, data, charts, etc.)*    Based on one case only, low device days. |

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| **Project Lead** | **Team Members** |
| **Name**  *(person accountable for project)* | **Names**  *(persons involved in project)* |
| Mohammad badawi jaber | Dr.masud nabi  Sundersand madline  Ahmad adam  WELAGAMAGE DON, JOSEPH  Aliberth  Mary, gayan  Diana ecardo  Liza briza  Sithara john  Nada turkistani  Princess austria  Bintu baby  Kristina evasco  Bintamol baly  Reham hariri  Maiden salas  Ibrahim Qoulaghasi |